Access to Prevention and Health Care Services for Immigrants With Communicable Diseases: A Resource for Public Health, Prevention & Care Providers

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This document was developed for medical care teams and public health officials working with immigrants with or vulnerable to HIV, tuberculosis, COVID-19 and/or mpox. This brief focuses on services available through public health programs. We have compiled information for health care providers and facilities and information that may be helpful for patients.

This document is an informational resource only and does not constitute legal advice.

HEALTH CARE COVERAGE OPTIONS FOR IMMIGRANTS

Lawfully Present Non-Citizens
Lawfully present non-citizens may be eligible for coverage through their state Medicaid program or the Children’s Health Insurance Program, subject to a five-year waiting period (the “five-year bar”). Certain non-citizens, such as refugees and asylees, may be eligible for Medicaid or CHIP without a five-year waiting period. Some states use federal funds to provide Medicaid benefits to lawfully residing children and pregnant people, regardless of their date of entry into the United States. Most lawfully present immigrants can also purchase individual and family health insurance through Affordable Care Act Marketplaces, without a waiting period, and are eligible for financial assistance through premium tax credits and cost-sharing reductions. Lawfully present non-citizens may qualify for the Medicare program if they are at least 65 years old, or under age 65 and receiving Social Security Disability Insurance. However, some older immigrants may be required to pay a high Medicare premium, depending on whether they have sufficient work history in the United States when they turn 65.

Undocumented Immigrants
Undocumented immigrants are generally not eligible for federally funded Medicaid or CHIP coverage, except for emergency services. However, states have the option to provide prenatal care using federal Medicaid funds regardless of immigration status. States may also expand Medicaid/CHIP benefits to undocumented immigrants using state funds. For example, many states offer postpartum coverage for up to 12 months regardless of immigration status. A few states offer full Medicaid/CHIP or other state-funded benefits to children and adults, regardless of their immigration status.  

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1 Federal law bars most immigrants who enter the U.S. after Aug. 22, 1996, from accessing “federal means-tested public benefits” (such as Medicaid/CHIP, TANF, SNAP, and SSI) during the five years after they secure “qualified” immigration status. Overview of Immigrant Eligibility for Federal Programs, National Immigration Law Center (updated Oct. 2023).

2 A comprehensive list of state policies providing health coverage to additional groups of immigrants using state or federal funds can be found here.
immigrants are also generally ineligible for private coverage through ACA Marketplaces, although a small number of states have used state funds to expand eligibility for subsidized Marketplace coverage to lower-income residents regardless of immigration status.\(^3\) Undocumented immigrants are not eligible for the Medicare program.

*See also* Kaiser Family Foundation’s *[Key Facts on Health Coverage of Immigrants](https://kff.org/health-reform/key-facts-on-health-coverage-of-immigrants/)* *(September 2023).*

### PUBLIC HEALTH RESOURCES FOR SELECTED CONDITIONS: HIV, COVID-19, MPOX, TB

#### HIV/AIDS Resources:

**Ryan White HIV/AIDS Program**

More than 50% of people diagnosed with HIV receive care and treatment services through the [Ryan White HIV/AIDS Program](https://www.hrsa.gov/ryanwhite) each year. RWHAP helps lower-income people with HIV receive medical care, medications and essential support services to help them stay in care. RWHAP plays a critical role in the U.S. public health response to HIV. In 2021, almost 90% of RWHAP clients reached viral suppression, exceeding the national viral suppression average of 65%.

RWHAP-funded organizations may offer services to eligible people with HIV regardless of immigration status; however, eligibility policies vary by jurisdiction. The Health Resources and Services Administration’s HIV/AIDS Bureau has clarified that immigration status is “irrelevant” for determining eligibility for RWHAP services and that grantees and subgrantees “should not share immigration status with immigration enforcement agencies.”\(^4\) Health care providers should familiarize themselves with local RWHAP-funded organizations that offer a range of medical and supportive services to help people living with HIV access consistent care and treatment, improve HIV-related health outcomes and reach and maintain viral suppression.

**RWHAP Part B and the AIDS Drug Assistance Program**

Providers should inquire as to whether their patients are eligible for or already enrolled to receive services from the RWHAP Part B program, including your state’s AIDS Drug Assistance Program. The RWHAP Part B program is the element of the [RWHAP infrastructure](https://www.hrsa.gov/ryanwhite) through which state and territorial health departments are funded to provide medications, medical care and support services to eligible clients.

RWHAP Part B provides grants to states and territories to improve HIV health care and support services. Core medical and support services that may be available through a state’s RWHAP Part B program include outpatient/ambulatory health services, mental health and substance abuse care, case management (medical and nonmedical), food and nutrition supports, emergency and short-term housing, limited legal services, linguistic services and non-emergency medical transportation. ADAP is a component of the RWHAP Part B program that provides medications

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\(^3\) For example, [Colorado](https://www.colorado.gov) uses state funds to offer Marketplace coverage with no premium cost for individuals with incomes up to 138% FPL. A similar program will be available in [Washington](https://www.wa.gov) in 2024.

to people with HIV that have limited or no health insurance,\(^5\) including clients who are ineligible for other public benefits due to their immigration status. More information on allowable RWHAP core medical and support services is available [here].

Part B and ADAP eligibility is open to individuals living with HIV who are low-income residents of a state or territory. Income and residency documentation requirements vary by jurisdiction. Providers should [contact] their state Part B or ADAP coordinator for more information about services available in your jurisdiction.\(^6\)

Providers should review their state ADAP override and exception policies allowing patients to access a transitional supply of medications when traveling, during emergencies or if medication is lost or stolen. While override policies often do not explicitly mention deportation or immigration-related detention, such policies may potentially be applied in these instances as permitted under state law. State ADAP policies vary in terms of circumstances in which exceptions may be granted, permissible frequency for advanced fills (e.g., ADAP may allow only two incidents per client per year), forms and documentation needed to process an exception, and how much medication can be dispensed (e.g., 60 days per incident). Providers should advise clients to inquire about arranging medication pickup or delivery with their respective ADAP programs. If the client is traveling to another state, including temporary relocation pending immigration proceedings, they may be able to have medication delivered to a temporary address or authorize someone else to pick it up in their place. Clients should verify the policies and procedures with their state ADAP or RWHAP case managers to prepare for unexpected circumstances.

Other Questions to Consider

- **Is the patient enrolled in the AIDS Drug Assistance Program?**
  - If not, check with your state ADAP regarding eligibility. If the client has temporarily relocated pending immigration proceedings, inquire whether they are enrolled in ADAP in their state of primary residence.
  - Patients ineligible for ADAP may be eligible for [Patient Assistance Programs and Cost-Sharing Assistance Programs](#).

- **Are testing services available for a patient’s partner through a local RWHAP Part B program?**
  - Check with your state RWHAP. Many programs offer HIV testing for the partners of patients or clients.

- **Will patients be liable for payment if they are hospitalized in the U.S.?**
  - RWHAP only covers outpatient care and treatment and does not assist with inpatient care. Learn your clinic’s or hospital’s policy regarding charity care and whether your state offers health assistance or coverage for immigrants. Remember

\(^5\) Part B recipients and subrecipients must help eligible clients find health care coverage, in compliance with HRSA HAB’s “Payor of Last Resort” requirement. RWHAP funds may be used to provide services to clients enrolled in or receiving services through public or private health insurance (e.g., private health coverage, Medicaid, Medicare) after other payors have been exhausted. For example, RWHAP funds may be used for patient cost-sharing (copayments, coinsurance and deductibles) for insured clients, health insurance premiums or for services not covered by insurance. [Clarifications Regarding the Use of Ryan White HIV/AIDS Program Funds for Health Care Coverage Premium and Cost Sharing Assistance](#), Policy Clarification Notice (PCN) #18-01, HRSA HAB, (rev. Aug. 30, 2018).

\(^6\) For more information about your state ADAP’s policies related to insurance premium and cost-sharing assistance, see NASTAD’s [2023 National RWHAP Part B ADAP Monitoring Project Annual Report (Table 21)](#).
that states must provide limited coverage of emergency medical services to non-citizens who would qualify for full Medicaid benefits but for their immigration status.

- **Are there resources to identify HIV care sites and providers outside of the U.S.**?
  - The AIDS Healthcare Foundation has a resource to help patients find HIV centers in Mexico. The American Academy of HIV Medicine has an online HIV provider directory that includes providers outside of the U.S., available at aahivm.org. The HIV Provider Directory includes listings from HIV Medicine Association members who opt in and indicate they are accepting new patients. You also may contact the HIV Medicine Association at info@hivma.org for assistance.

- **Where can I find patient-centered information about HIV in multiple languages?**
  - NAM AIDSMAP has a comprehensive library of HIV-related resources translated into 21 languages. Please check the date for when the resource was last updated.
  - The U.S. Food and Drug Administration also maintains fact sheets on FDA-approved HIV treatments that are available in Spanish.

**COVID-19 Resources:**

**CDC Bridge Access Program**
CDC’s Bridge Access Program will provide COVID-19 vaccines free of charge to adults over 18 years of age without health insurance or whose insurance does not cover all COVID-19 vaccination costs. The program will end by December 2024.

*Note: Free, updated COVID-19 vaccines are available to most adults through private health insurance, Medicaid or Medicare.*

**NIH Home Test to Treat Program**
The NIH Home Test to Treat Program will provide free at-home COVID-19/flu tests and free telehealth care and antiviral treatment for those who are uninsured. Identification is not required to enroll, and treatment can be shipped or picked up at a local pharmacy at no cost. The program is expected to operate until spring 2024.

*Note: Patient assistance programs for Paxlovid and molnupiravir are also available to provide free or low-cost antivirals for COVID-19, and many pharmacies still have supplies of government-distributed medication that can be dispensed for free. The HHS Therapeutics Locator website may be used to find pharmacies reporting available supply.*

**National Resource Center for Refugees, Immigrants and Migrants**
The National Resource Center for Refugees, Immigrants and Migrants has a webpage dedicated to COVID-19 vaccine resources. The page includes a guide to addressing legal concerns around immigration-based vaccine hesitancy and a resource addressing patients’ concerns over vaccine eligibility and photo ID requirements, also available in Spanish.

**CDC Immigrant and Refugee Health**
CDC has a webpage dedicated to immigrant, refugee and migrant health educational resources, including resources on COVID-19.
Mpox Resources:

Mpox Vaccine
The two-dose mpox vaccine is available free of charge at sites across the country.

IDSA Mpox Fact Sheet
IDSA developed a mpox fact sheet that is also available in Spanish.

Tuberculosis Resources:

CURE TB Referral Program
This program, managed by the San Diego County Public Health Services TB Control Branch, provides referrals for patients traveling between the U.S., Mexico and South America. More information is available online or by calling (619) 542-4013.

CDC International Notification of TB Cases
CDC also has an international notification program for patients with active TB undergoing treatment who leave the country. More information is available online.

State and Local Health Departments
Your state and local health departments also may offer resources for your patients with TB.

MMIGRATION POLICIES

Your patients may be affected by immigration policies and enforcement. The Department of Homeland Security posts information about the implementation of various immigration policies on its website. Information on the public charge rule, affidavits of support and knowing your rights materials are available from the National Immigration Law Center website. Information on the status of asylum policy and processes is available from the Immigration Equality website.

Information on executive orders and court cases affecting immigrants who were eligible for the Deferred Action for Childhood Arrivals or “Dreamers” is available from the U.S. Department of Homeland Security, the American Immigration Council website, the Immigrant Legal Resource Center website and the NILC website. Due to a federal court order July 16, 2021, DHS is prohibited from granting new DACA applications but is still processing renewals. More information on DACA application eligibility is available on the DHS website.

The American Immigration Lawyers Association and the American Immigration Council also are resources for immigration policy updates and information.

INFORMATION FOR HEALTH CARE PROVIDERS

Knowing Your Rights as a Health Care Provider
For many immigrants and their family members, fear of immigration enforcement is a deterrent to
seeking health services. Health care providers have a critical role to play in protecting their patients and ensuring access to care without fear of immigration-related consequences.⁷

- Health care providers have no affirmative legal obligation to inquire into or report to federal immigration authorities a patient’s immigration status.
- The Health Insurance Portability and Accountability Act privacy rule generally prohibits the use or disclosure of patient information without the patient’s consent, except when required by law.
- Health care providers can refuse to provide information about patients to law enforcement officials unless the request is pursuant to a judicial warrant or court order for a specifically identified individual or set of records.
- Immigration agents may enter a public area of a health care facility without a judicial warrant or the facility’s consent and may attempt to question anyone present.
- To enter a private area (an area not open to the public) of a health care facility, enforcement officers must have either a judicial warrant (signed by a judge and specifying the address to be searched) or consent from an authorized person, such as a predesignated staff member of the health facility.

**Educating Patients on Their Rights**

Clinics and hospitals can help educate patients and clients on their immigration-related rights by distributing information in waiting rooms and other public areas on immigrant rights and resources for legal assistance. Suggested resources include:

- The Immigrant Defense Project has comprehensive resources for immigrant communities impacted by ICE interference, including Know Your Rights flyers in 16 languages.
- The Immigrant Legal Resource Center provides free Know Your Rights card printable templates in seven languages that clients can carry in their wallets.
- ACLU has created a guide, available in multiple languages, about constitutional rights during encounters with ICE or other law enforcement entities.
- The National Immigration Law Center has comprehensive resources focused on access to health care services for immigrants.
- The Immigrant Legal Resource Center has family preparedness plan resources in English, Spanish and Chinese.

Additional resources, including information about accessing legal aid, are available at the end of the document.

**Developing a Plan**

In the case of an emergency, advise patients to develop a communications plan to ensure that family members and caregivers can be alerted if needed and to ensure that their necessary medical information is available. Patients should write down and carry with them essential health information, such as their medications with dosage and contact information for their health care providers, including a social worker or case manager if they have one.

Patients also may consider sharing medical information, including health care providers’ contact information, with someone they trust to help with a legal case or to help ensure proper medical care if detained.

In the event that a patient or family member is detained by immigration authorities, there is an ICE detainee locator system online.

**Resources For Health Care Providers**

**National Immigration Law Center**
*Medical Assistance Programs for Immigrants in Various States Table*
State-specific information on eligibility for health coverage for additional groups of immigrants beyond federal eligibility.

*Community Education Resources*
Information on issues of concern to low-income immigrants.

**Health Care**
Health care information for immigrants.

**National Association of Community Health Centers**
*Migratory and Seasonal Agricultural Patients*
Resources to support health centers caring for migratory and seasonal agricultural patients.

**American Academy of Pediatrics**
*Immigrant Child Health Resources*
Guidance and information to support pediatricians caring for immigrant children, youth and families.

**America’s Essential Hospitals**
*Immigration and Health Care: Resources for Hospitals*

**For Legal Assistance**

**Immigration Advocates Network**
*National Immigration Legal Services Directory*
Provides a searchable online directory of nonprofit immigration legal services providers that offer free or low-cost immigration legal services.

*Department of Justice List of Pro Bono Attorneys by State*
Department of Justice Executive Office for Immigration Review listing of pro bono attorneys by state.

*American Immigration Lawyers Association Immigration Attorney Directory*
Directory of immigration lawyers searchable by city, state and type of legal assistance and language spoken.

*Immigration Equality*
Provides information and resources for LGBTQ immigrants, including Legal Help.

**BEWARE OF IMMIGRATION CONSULTANT OR “NOTARIO” FRAUD**
The information below is from http://www.stopnotariofraud.org/
Who is authorized to help immigrants with their legal matters?
Only a licensed lawyer or accredited representative is authorized and qualified to assist you with your immigration case or green card application. It is against the law for notaries public to provide immigration advice – even filling out forms or a green card application is something that only a duly licensed immigration lawyer or accredited representative should do.

Who are “notarios”?
Notarios are not lawyers. They also are not valid accredited representatives approved by the U.S. government. Often, they use the term “notario publico” to advertise their services in the Hispanic community. That title is not recognized in the United States as it is in some Latin American countries. While many legitimate community and religious organizations provide immigration-related services, non-lawyers who advertise as legal “consultants” or “notarios publicos” are not authorized or qualified to help with immigration law-related matters. These notarios often take advantage of people from their ethnic community. Some attempt to provide legal service but are not competent. Still, others will take clients’ money without intending to file documents or provide help.

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